

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 19, 2005 8:00 am**  
**Secretary of State**

04-19-2005 90021 037 \*\*\*\*50.00

**DOCUMENT # L04000024541**

1. Entity Name  
**AURORA PARTNERS LLC**



Principal Place of Business  
**4604 4TH AVENUE DRIVE EAST  
BRADENTON FL 34208**

Mailing Address  
**4949 SR 64 EAST  
PMB 140  
BRADENTON FL 34208**

**2005/01/17**



2. Principal Place of Business  
**4949 SR 64 EAST**

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04162005 Chg-LLC CR2E083 (10/03)

City & State

City & State

4. FEI Number

☒ Applied For  
☐ Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HILL, JOHN J  
4604 4TH AVENUE DRIVE EAST  
BRADENTON, FL 34208

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2005**

**Make check payable to  
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
HILL, JOHN J  
4604 4TH AVENUE DRIVE  
BRADENTON, FL 34208 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
HILL, JOHN J  
13144 PEREGRIN CIRCLE  
BRADENTON, FL 34212 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
FLEMING-HILL, RHONDA L  
4604 4TH AVENUE DRIVE EAST  
BRADENTON, FL 34208 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
FLEMING-HILL, RHONDA L  
13144 PEREGRIN CIRCLE  
BRADENTON, FL 34212 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
BERNARDO, THOMAS C  
12245 GARDEN LAKE CIRCLE  
ODESSA, FL 33556 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
BERNARDO, SELINA M  
4604 4TH AVENUE DRIVE EAST  
ODESSA, FL 33556 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
BERNARDO, SELINA M  
12245 GARDEN LAKE CIRCLE  
ODESSA, FL 33556 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

*Rhonda Fleming Hill*

4/16/05 941 746 8401